

**ARIZONA STATE BOARD OF NURSING**

**4747 N. 7<sup>th</sup> Street Suite 200**

**Phoenix Arizona 85014-3655**

**602-771-7800**

IN THE MATTER OF NURSING PROGRAM  
APPROVAL ISSUED TO:

GRAND CANYON UNIVERSITY

3300 W CAMELBACK RD

PHOENIX, AZ 85061

RESPONDENT

**NOTICE OF DEFICIENCIES TO  
NURSING PROGRAM**

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The Arizona State Board of Nursing (“Board”) considered this matter in open meeting on March 27, 2015 following a complaint investigation by the Board’s representative regarding (Nursing Program) (“Respondent”) which holds nursing program approval pursuant to Arizona Revised Statutes (“A.R.S.”) § 32-1644 and Arizona Administrative Code (“A.A.C.”) R4-19-210. The Board voted to issue a Notice of Deficiency to Respondent pursuant to (“A.R.S”) § 32-1644 (D) and A.A.C. R4-19-212(A).

**FACTUAL ALLEGATIONS**

1. Respondent, Grand Canyon University College of Nursing and Health Care Professions, main campus in Phoenix, Arizona (“Respondent”), holds Board approval for an RN nursing program.
2. The Board has authority pursuant to A.R.S. §§ 32-1606 (B) (1) (2) (8) (10),

and 32-1664 (C) and (D) to issue this Notice of Deficiency against Respondent for violations of the Nurse Practice Act, A.R.S. §§ 32-1661 - 1669 and A.A.C. Title 4, Chapter 19, Article 2.

3. Respondent admitted nursing students to the Spring 2015 semester which started on January 5, 2015, in critical care, medical surgical and maternity nursing courses at multiple campus sites knowing they lacked clinical faculty necessary to implement the curriculum as presented in the course syllabi. The above conduct is a violation of A.A.C. Rules 4-19-204(B) R4-19-205(A) and (B), R4-19-211(4),(5) and (6).
4. Respondent failed to provide exams I and II to faculty members who were teaching critical care nursing at the Boswell site (Sun City, AZ) in Spring 2015 prior to course implementation, a violation of R4-19-204(G)(1) and R4-19-211(1).
5. Respondent did not provide advance notice to students of clinical cancellation for clinical rotations at the Boswell campus site during spring semester 2015, which began on January 5, 2015. Third semester students in clinical group B were not notified of cancellation until arriving at site for the last two scheduled maternity rotations; Fourth semester students in clinical group A were not notified on one occasion of cancellation of critical care clinical until arriving at the clinical site; students were sent home as no instructor was available. This conduct is a violation of R4-19-205(F).
6. Respondent scheduled a standardized (HESI) Pharmacology exam for 6:00am on 2/17/2015 on its main campus. Respondent admits that the assigned the

faculty member arrived late, canceled the test and sent students home. This conduct is a violation of R4-19-205(F).

7. Respondent attempted to make up clinical sessions in critical care nursing with a tour of the campus arena and a didactic session on first responders, none of which involved actual patient care, on or about 1/23/2015. Additionally students were informed that they could document more clinical time than was actually spent in the activity, a violation of R4-19-206(C)(4), (D)(2), and R4-19-211(4) and (9).
8. Respondent attempted to substitute all actual clinical days in maternity nursing with simulation with no patients present for students at its St. Joseph's site between January and March, 2015. The above conduct constitutes a violation of R4-19-206(D)(2) and (F) which requires actual patient care for clinical experiences in these specific areas and R4-19-211(4) which requires programs to follow their curriculum design.
9. Respondent provided misleading information to the Board in its 10/28/2014 letter by informing the Board that Dr. Melanie Logue was the sole nursing program administrator. Other documents circulated to faculty and students at this same time indicated that there would be 2 co-leads for the program: Dr. Logue and Maria Quimba. The above is a violation of R4-19-211(10).
10. Between October 27, 2014 and February 20, 2015, Respondent failed to center administrative control of the nursing program in the position of nursing program administrator and failed to provide support and resources to meet rule requirements. The above is a violation of R4-19-201(D) and (H).

- 11.** On or about 2/6/2015 Respondent suspended the faculty practice of test item review and collaborative meetings to determine the validity and reliability of Respondent's exams, a violation of R4-19-206(C)(4) and R4-19-211(1). Standard practices in nursing education also require faculty exam item review and validation.
- 12.** Respondent's Faculty Y contacted four students at the Scottsdale Health Care campus site (Scottsdale, AZ) prior to and regarding the Board staff site visit of 2/18/14. Faculty Y admitted that she was aware that some of these students wrote letters complaining about the program. Faculty Y admitted to Board staff that she informed students that repercussions for students complaining to the Board may include loss of nursing program accreditation. Students who spoke with the Board staff reported that these conversations had the effect of discouraging other students from speaking with Board staff. Such conduct constitutes interference in the Board investigation and is a violation of R4-19-211 (12).
- 13.** Student C reported that Respondent's Recruiter (John Matney) cited extensive clinical experience as a selling point in encouraging her to attend Respondent's program. According to Student C, clinical rotations were touted in both individual and group admission meetings. Clinical learning with actual patients is also featured in Respondent's basic information about the nursing program on Respondent's website and is included in the description of five nursing courses. However, Respondent failed to provide the clinical rotations as

promised. Advertising components of a program that the program does not fulfill is a violation of R4-19-211(9) and (10).

14. In a communication received by the Board on March 19, 2015, Respondent projected that between 44 and 114 students will be delayed from progressing in its program due to lack of clinical faculty, and resulting cancellations of scheduled and required clinical rotations, between January and April, 2015. Such conduct is harmful to students and a violation of R4-19-204(B), R4-19-206(C)(2), and R4-19-211(5).
15. Respondent provided a letter to the Board on March 26, 2015 which reported that the program is 100% staffed for summer rotations, has refunded student clinical fees, has hired additional clinical faculty and is working toward standard implementation of academically sound practices.

### **LEGAL VIOLATIONS**

#### **ARS §32-1601. Definitions**

22. "Unprofessional conduct" includes the following whether occurring in this state or elsewhere:
  - (d) Any conduct or practice that is or might be harmful or dangerous to the health of a patient or the public.
  - (g) Willfully or repeatedly violating a provision of this chapter or a rule adopted pursuant to this chapter.
  - (h) Committing an act that deceives, defrauds or harms the public.

- (j) Violating this chapter or a rule that is adopted by the board pursuant to this chapter.

#### **R4-19-201. Organization and Administration**

**D.** The parent institution shall center the administrative control of the nursing program in the nursing program administrator and shall provide the support and resources necessary to meet the requirements of R4-19-203 and R4-19-204 (Factual Allegation 8)

**H.** The parent institution shall appoint a sole individual to the full-time position of nursing program administrator. The parent institution shall ensure that the individual appointed meets or exceeds the requirements of, and fulfills the duties specified in, R4-19-203, whether on an interim or permanent basis

#### **R4-19-204. Faculty; Personnel Policies; Qualifications and Duties**

**B.** A nursing program shall provide at a minimum the number of qualified faculty members necessary for compliance with the provisions of this Article and comparable to that provided by approved programs of equivalent size and program type, or, in the case of no equivalent program, a number scaled relative to an approved program.

**G.** Under the leadership of the nursing program administrator, nursing program faculty members shall:

**1.** Develop, implement, evaluate, and revise the program of learning including the curriculum and learning outcomes of the program;

**R4-19-205. Students; Policies and Admissions**

- A. The number of students admitted to a nursing program shall be determined by the number of qualified faculty, the size, number and availability of educational facilities and resources, and the availability of the appropriate clinical learning experiences for students. The number of students admitted shall not exceed the number for which the program was approved plus minor increases allowed under R4-19-209 without Board approval. (Factual Allegation 1)
- B. A nursing program shall implement written student admission and progression requirements that are evidence-based, allow for a variety of clinical experiences and satisfy the licensure criteria of A.R.S. Title 32, Chapter 15 and A.A.C. Title 4 Chapter 19.

F. A nursing program shall communicate changes in policies, procedures and program information clearly to all students, prospective students and the public and provide advance notice similar to the advance notice provided by an approved program of similar size and type.

**R4-19-206. Curriculum**

- C. A nursing program administrator and faculty members shall ensure that the curriculum:
2. Is designed so that the student is able to achieve program objectives within the curriculum plan;
  4. Incorporates established professional standards, guidelines or competencies;
- D. A nursing program shall provide for progressive sequencing of classroom and clinical instruction sufficient to meet the goals of the program and be organized in such a manner to allow the student to form necessary links of theoretical knowledge, clinical reasoning, and practice.

2. A registered nursing program shall provide clinical instruction that includes, at a minimum, selected and guided experiences that develop a student's ability to apply core principles of registered nursing in varied settings when caring for:

- a. Adult and geriatric patients with acute, chronic, and complex, life-threatening, medical and surgical conditions;
- b. Peri-natal patients and families;
- c. Neonates, infants, and children;
- d. Patients with mental, psychological, or psychiatric conditions; and
- e. Patients with wellness needs

F. A nursing program may utilize simulation in accordance with the clinical objectives of the course. Unless approved under R4-19-214, a nursing program shall not utilize simulation for an entire clinical experience with any patient population identified in subsection (D) of this Section.

#### **R4-19-211. Unprofessional Conduct in a Nursing Program**

A disciplinary action, denial of approval, or notice of deficiency may be issued against a nursing or refresher program for any of the following acts of unprofessional conduct in a nursing program:

- 1. Failure to maintain minimum standards of acceptable and prevailing educational or nursing practice;
- 2. Deficiencies in compliance with the provisions of this Article;
- 4. Non-compliance with the program's or parent institution's mission or goals, program design, objectives, or policies;



5. Failure to provide the variety and number of clinical learning opportunities necessary for students to achieve program outcomes or minimal competence;
6. Student enrollments without necessary faculty, facilities, or clinical experiences;
9. Fraud or deceit in advertising, promoting or implementing the program;
10. Material misrepresentation of fact by a nursing or refresher program in any advertisement, application or information submitted to the Board;
12. Any other evidence that gives the Board reasonable cause to believe the program's conduct may be a threat to the safety and well-being of students, faculty, patients or potential patients.

### **CORRECTIVE ACTION**

Respondent shall correct the deficiencies identified above within **6 months** of the date of service of this Notice. [A.A.C. R4-19-212(A)].

Respondent shall, within **30 days** of the date of service of this Notice, file a plan to correct and implement that plan to correct each of the identified deficiencies after consultation with the Board or designated Board representative. [A.A.C. R4-19-212(A)(1)].

Failure to correct the deficiencies within the period of correction may result in restriction of Respondent's ability to admit new students and/or rescission of program approval. [A.R.S. § 32-1644 (D) and A.A.C. R4-19-212(B)(C)].

During the period of correction Respondent agrees to supply the Board with monthly reports on the four identified areas of concern: clinical experiences, faculty staffing and participation (including minutes of any and all faculty meetings), communication and organizational structure. Prior to the end of the period of correction, Respondent shall submit a

self-study, on a form supplied by the Board, for the purpose of determining compliance with all Board standards. Following receipt of the self-study, Board staff shall schedule and conduct a site visit under A.R.S. § 32-1644 (D) and A.A.C. R4-19-213(E).

On or before the last day of the period of correction, the program shall file a report with the Board containing evidence that all deficiencies are remedied.

### **NOTICE OF APPEAL RIGHTS**

Respondent may, within 30 days of the date of service of this Notice, submit a written request for a hearing before the Office of Administrative Hearings to appeal the Board's determination of deficiencies. Hearings shall be conducted in accordance with A.R.S. Title 41, Chapter 6, Article 10 and 4 A.A.C. 19, Article 6. [A.A.C. R4-19-212(A)(2)].

If the Board's determination is not appealed or is upheld upon appeal, the Board shall conduct periodic evaluations of the program during the time of correction to determine whether the deficiencies have been corrected. [A.A.C. R4-19-212(A)(3)].

For answers to questions regarding this Notice, contact Pamela Randolph at (602) 771-7803 (prandolph@azbn.gov) or Ronda Doolen at (602)771-7877 (rdoolen@azbn.gov).

Dated the 8th day of April, 2015

SEAL

Handwritten signature of Joey Ridenour in black ink.

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Joey Ridenour, R.N., M.N.  
Executive Director

Copy mailed certified this 8th day of April, 2015 certificate number: **7011 3500 0001 5219 3835** and mailed by U.S. Certified Mail to:

**Melanie Logue, PhD., RN**  
Nursing Program Director  
Grand Canyon University  
3300 W. Camelback Road  
Phoenix, Arizona 85061

BY: LYN LEDBETTER  
ADMINISTRATIVE ASSISTANT